

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/565960

FILING DATE
JAN 26 2006

APPLICANT(S)

CLAIMS

AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1		/				51						
2			/			52						
3				/		53						
4					/	54						
5						55						
6						56						
7						57						
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13						63						
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44						94						
45						95						
46						96						
47						97						
48						98						
49						99						
50						100						
TOTAL IND.			/			TOTAL IND.						
TOTAL DEP.			13			TOTAL DEP.						
TOTAL CLAIMS			14			TOTAL CLAIMS						

BEST AVAILABLE COPY